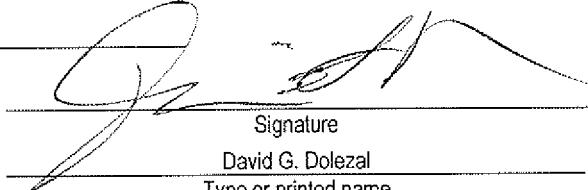
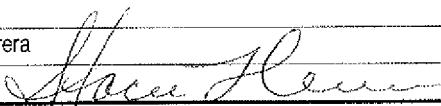
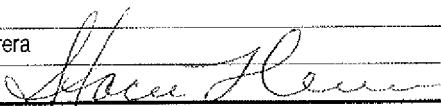
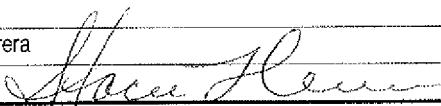
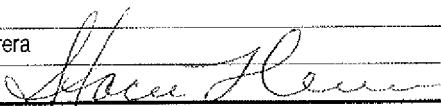
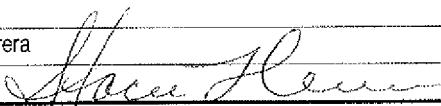


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: SC0985ET																					
<input type="checkbox"/> in re Application of	Jean-Michel Reynes et al																						
<input type="checkbox"/> Application Number	10/518,158	Filed December 10, 2004																					
<input type="checkbox"/> For	POWER SEMICONDUCTOR DEVICE AND METHOD OF MANUFACTURING THE SAME																						
<input type="checkbox"/> Group Art Unit	2814	Examiner John C. Ingham																					
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="width: 60%; text-align: left; padding: 2px;">One Month (37 CFR 1.17(a)(1))</td> <td style="width: 25%; text-align: right; padding: 2px;">\$ 120.00</td> </tr> <tr> <td style="text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> <td style="text-align: left; padding: 2px;">Two Months (37 CFR 1.17(a)(2))</td> <td style="text-align: right; padding: 2px;">\$ 450.00</td> </tr> <tr> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: left; padding: 2px;">Three Months (37 CFR 1.17(a)(3))</td> <td style="text-align: right; padding: 2px;">\$ 1020.00</td> </tr> <tr> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: left; padding: 2px;">Four Months (37 CFR 1.17(a)(4))</td> <td style="text-align: right; padding: 2px;">\$ 1590.00</td> </tr> <tr> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: left; padding: 2px;">Five Months (37 CFR 1.17(a)(5))</td> <td style="text-align: right; padding: 2px;">\$ 2160.00</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 503079</p> <p><input type="checkbox"/> I have enclosed a duplicate copy of this sheet.</p> <p>I am the:</p> <p><input type="checkbox"/> Applicant/inventor</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.</p> <p><input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 41,711)</p> <p><input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p> <p><u>10/25/06</u> _____ Date</p> <p> Signature</p> <p>David G. Dolezal Type or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> form(s) are submitted</p> <p style="text-align: center;">CERTIFICATE OF SUBMISSION</p> <p>I hereby certify that this correspondence is being facsimile transmitted, submitted via EFS, or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on this date: <u>10-27-06</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"><input type="checkbox"/> Typed or printed name</td> <td style="width: 33%; padding: 5px;">Stacie Herrera</td> <td style="width: 33%; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Signature</td> <td colspan="2" style="padding: 5px;"></td> </tr> </table>			<input type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 120.00	<input checked="" type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 450.00	<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 1020.00	<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1590.00	<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2160.00	<input type="checkbox"/> Typed or printed name	Stacie Herrera		<input type="checkbox"/> Signature		
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